

# Maine PRISONER ADVOCACY Coalition



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## **Testimony in support of LD 663 to the Committee on Criminal Justice and Public Safety April 21, 2021**

Senator Deschambault, Representative Warren, and distinguished members of the Committees.

My name is Peter Lehman and I live in Thomaston. I am a formerly incarcerated citizen and a person in long-term recovery.\* I am testifying on behalf of the Maine Prisoner Advocacy Coalition whose goal is to promote restorative practices in order to increase public safety and the health of our community.

**Substance use becomes a disorder** when it leads to health issues or problems at work, school, or home. Continued use, despite these self-destructive consequences, is most often rooted in personal needs or pain most often rooted in trauma.

Put another way, self-destructive substance use is most often self-medication for other mental health issues. Treatment for substance abuse is generally addressing these underlying issues—not merely abstaining from use.

Medication is helpful because it mutes or eliminates the cravings for use. Note, that these cravings are not just physical but also mental—when the underlying issues trigger a learned response to use.

This is why medications can ASSIST treatment, but **medications are not the treatment.** Handing out pills is not treatment.

I mention all this to get to the observation that getting to the underlying issues and dealing with them is **not simple, not quick, and truly life-changing.**

As an example, the 12-Steps of Alcoholics Anonymous only mention “alcohol” once in the very first step. They are mostly

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\* In the interest of honesty and disclosure, a personal background statement is available on request.

about life-changing “treatment” of the whole person. It’s the underlying issues that turn use into compulsive and self-destructive use.

I hope this explains why LD 663 is so important.

This is also why it should be available **throughout** incarceration.

We urge that you make the bill more explicit in requiring this treatment **throughout** incarceration, not just a few pills and no treatment at the end.

We suggest that sub-§10-A paragraphs C and D and D should explicitly say “throughout incarceration.”

“Comprehensive behavioral treatment options for clients that involve recovery groups, individual and group counseling and clinical support” are **NOT** available throughout incarceration. They **SHOULD BE.**<sup>1</sup>

We strongly support LD 663, with the revisions we suggest, and urge you unanimously vote Ought To Pass.

Thank you for your attention and support.

I would be happy to answer any questions you may have.

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<sup>1</sup> We believe the Department of Corrections will find that providing this treatment throughout incarceration will significantly reduce behavior issues since much of those behaviors involve drug seeking/drug cravings-related behaviors. In fact, we have repeatedly suggested to the Department that the “sanction” for many disciplinary violations should be proper treatment, assisted by medication when appropriate.